This is an official
DHEC Health Update

2013-2014 South Carolina Influenza Surveillance

This update is to provide healthcare professionals with the latest information regarding:

- SC influenza surveillance and reporting systems
- State-mandated influenza surveillance
- Voluntary influenza surveillance
- State laboratory influenza testing and specimen submission
- Resource Links
- Attachments: Regional health department contact information, positive rapid influenza test reporting worksheet, and influenza hospitalization reporting worksheet

SC Influenza Surveillance and Reporting Systems

South Carolina influenza surveillance consists of both mandatory and voluntary reporting systems for year-round influenza surveillance. These networks provide information on influenza virus strain and subtype and influenza disease burden.

Combined, these systems assist in:

- Determining when and where influenza activity is occurring in the state
- Determining what influenza viruses are circulating
- Detecting changes in influenza viruses
- Tracking influenza-related illness
- Understanding influenza morbidity and mortality in SC

Data from these systems are reported on DHEC's influenza surveillance website:
http://www.scdhec.gov/flu/flu-activity-surveillance.htm

State-mandated Influenza Surveillance Components

SC State Law # 44-29-10 and Regulation # 61-20 requires reporting of diseases and conditions to local and state health departments. The following influenza-related conditions are reportable:

- Influenza A, novel or avian (not seasonal H1 or H3)
  Human infections with novel or avian influenza virus A (other than seasonal H1, H3, or 2009 H1N1) should be reported immediately to the local health department. This includes variant strains such as influenza A H1N1v, A H1N2v, and A H3N2v.

- Laboratory confirmed reports (culture, RT-PCR, DFA, IFA)
  Laboratory reports of influenza culture, RT-PCR, DFA, and IFA results should be reported to DHEC within 3 days either electronically via the Carolina's Health Electronic Surveillance System (CHESS) or using the DHEC 1129 card.

- Laboratory confirmed influenza-associated hospitalizations
  The total number of laboratory confirmed influenza hospitalizations should be reported to the regional health department by age group (0-4, 5-18, 19-24, 25-49, 50-64, 65+) by **noon** each **Monday** for the preceding week. Laboratory confirmation includes culture, RT-PCR, DFA, IFA, or rapid test. For weekly reporting please see the attached laboratory confirmed influenza hospitalizations reporting worksheet.

- Laboratory confirmed influenza-associated deaths
  All influenza deaths (pediatric and adult) are reportable within 24 hours by phone to the regional health department. Laboratory confirmation includes culture, RT-PCR, DFA, IFA, rapid test or autopsy results consistent with influenza. Upon notification of a death, the Regional Epidemiology Program Manager will follow up to obtain additional information needed for the case report form.

- Positive Rapid Antigen Tests
  The total number of positive rapid antigen tests by type (A, B, A and B, or unknown) should be reported to the regional health department by **noon** each **Monday** for the preceding week. For weekly reporting please see the attached positive rapid influenza test results summary worksheet.

Voluntary Influenza surveillance

In South Carolina, sentinel providers participate in a voluntary influenza monitoring network in which influenza-like illness is monitored and reported (ILINet).

- U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet)
  ILINet is a national surveillance system in which a network of providers submit the number of patients seen with influenza-like symptoms and the total number of patients seen each week. ILI is defined as fever (temperature of $\geq$100°F) plus a cough and/or a sore throat in the absence of another known cause.

  Providers who are interested in participating in ILINet should contact the influenza surveillance coordinator at springcb@dhec.sc.gov.

State Laboratory Testing and Specimen Submission

The SC DHEC Bureau of Laboratories (BOL) will continue to offer viral culture testing and subtyping, focusing on the following groups:

- Medically attended ILI and acute respiratory illness (ARI) in children under 18 years of age,
- Unusual or severe presentations of ILI,
- Patients admitted to hospital intensive care units with severe influenza-like illness (ILI) and no other confirmed diagnosis (e.g. RSV, Adenovirus),
- ILI outbreaks, particularly among children in child-care and school settings,
- Patients with ILI symptoms and recent swine contact,
- Fatalities associated with ILI.

Testing may also be performed at the BOL when public health staff in the Division of Acute Disease Epidemiology (DADE) or the Regional Public Health Epidemiologic Response staff determine that such testing is necessary (e.g., under the auspices of an outbreak investigation). **Influenza RT-PCR will not be offered routinely and must be coordinated with a DHEC regional Epidemiology Program Manager or Epidemiologist. Acceptable Specimens for Testing at the SC DHEC BOL**

The current specimen types acceptable for testing by our SC DHEC Bureau of Laboratories are:

- Upper respiratory: nasopharyngeal swab (NPS) or throat swab

- Lower respiratory: bronchoalveolar lavage tracheal aspirates, bronchial washes

A nasopharyngeal swab remains the specimen of choice for influenza testing. Lower respiratory specimens may be appropriate for critically ill patients who are highly suspected of having influenza. These patients may clear virus from their upper respiratory tract, while lower respiratory specimens remain positive.

Specimen Submission

If testing is indicated, collect a specimen as soon as possible after symptom onset and record the date of onset on the test request form. All specimens should be submitted in viral transport media. Please use polyester swabs when collecting nasopharyngeal or throat specimens.

- Specimens submitted for viral culture can be shipped at room temperature.

- RT-PCR testing will be offered only through coordination with a DHEC Regional Epidemiology Program Manager or Epidemiologist. When testing is approved sample submission requirements will be given.

- Specimens should be submitted along with the SC DHEC BOL Laboratory Request Form (D-1335, multi-part form, available from the BOL).

Resources for Additional Information

- DHEC Influenza Monitoring Website:
  http://www.scdhec.gov/flu/flu-activity-surveillance.htm

- South Carolina 2013 List of Reportable Conditions
  http://www.scdhec.gov/health/disease/reportables.htm

- CDC Influenza surveillance website:
  http://www.cdc.gov/flu/weekly/fluactivity.htm

DHEC contact information for reportable diseases and reporting requirements

Reporting of influenza is consistent with South Carolina Law requiring the reporting of diseases and conditions to your state or local public health department. (State Law # 44-29-10 and Regulation # 61-20) as per the DHEC 2012 List of Reportable Conditions available at: http://www.scdhec.gov/health/disease/reportables.htm. Federal HIPAA legislation allows disclosure of protected health information, without consent of the individual, to public health authorities to collect and receive such information for the purpose of preventing or controlling disease. (HIPAA 45 CFR §164.512).

Regional Public Health Offices – 2013

Mail or call reports to the Epidemiology Office in each Public Health Region.

LOW COUNTRY PUBLIC HEALTH REGION
Berkeley, Charleston, Dorchester
4050 Bridge View Drive, Suite 600
N. Charleston, SC 29405
Phone: (843) 953-0043
Fax: (843) 953-0051
Nights / Weekends: (843) 441-1091

Beaufort, Colleton, Hampton, Jasper
219 S. Lemacks Street
Walterboro, SC 29488
Phone: (843) 549-1516
Fax: (843) 549-6845
Nights / Weekends: (843) 441-1091

Allendale, Bamberg, Calhoun, Orangeburg
PO Box 1126
1550 Carolina Avenue
Orangeburg, SC 29116
Phone: (803) 268-5866
Fax: (843) 549-6845
Nights / Weekends: (843) 441-1091

MIDLANDS PUBLIC HEALTH REGION
Kershaw, Lexington, Newberry, Richland
2000 Hampton Street
Columbia, SC 29204
Phone: (803) 576-2749
Fax: (803) 576-2993
Nights / Weekends**:** (888) 554-9915

Chester, Fairfield, Lancaster, York
PO Box 817
1833 Pageland Highway
Lancaster, SC 29720
Phone: (803) 286-9948
Fax: (803) 286-5418
Nights / Weekends: (888) 554-9915

Aiken, Barnwell, Edgefield, Saluda
222 Beaufort Street, NE
Aiken, SC 29801
Phone: (803) 642-1618
Fax: (803) 643-8386
Nights / Weekends: (888) 554-9915

PEE DEE PUBLIC HEALTH REGION
Chesterfield, Darlington, Dillon, Florence, Marlboro, Marion
145 E. Cheves Street
Florence, SC 29506
Phone: (843) 661-4830
Fax: (843) 661-4859
Nights / Weekends: (843) 915-8845

Clarendon, Lee, Sumter
PO Box 1628
105 North Magnolia Street
Sumter, SC 29150
Phone: (803) 773-5511
Fax: (803) 775-9941
Nights/Weekends: (843) 915-8845

Georgetown, Horry, Williamsburg
1931 Industrial Park Road
Conway, SC 29526-5482
Phone: (843) 915-8804
Fax: (843) 365-0085
Nights/Weekends: (843) 915-8845

UPSTATE PUBLIC HEALTH REGION
Anderson, Oconee
220 McGee Road
Anderson, SC 29625
Phone: (864) 260-5801
Fax: (864) 260-5623
Nights / Weekends: (866) 298-4442

Abbeville, Greenwood, Laurens, McCormick
1736 S. Main Street
Greenwood, SC 29646
Phone: (864) 227-5947
Fax: (864) 942-3690
Nights / Weekends: (888) 298-4442

Cherokee , Greenville, Pickens
PO Box 2507
200 University Ridge
Greenville, SC 29602-2507
Phone: (864) 372-3133
Fax: (864) 282-4373
Nights / Weekends: (866) 298-4442

UPSTATE PUBLIC HEALTH REGION
(continued)
Spartanburg, Union
PO Box 2507
200 University Ridge
Greenville, SC 29602-2507
Phone: (864) 372-3133
Fax: (864) 282-4373
Nights / Weekends: (866) 298-4442

DHEC Bureau of Disease Control
Division of Acute Disease Epidemiology
1751 Calhoun Street
Box 101106
Columbia, SC 29211
Phone: (803) 898-0861
Fax: (803) 898-0897
Nights / Weekends: 1-888-847-0902

DHEC
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South Carolina Department of Health and Environmental Control

www.scdhec.gov

Categories of Health Alert messages:
Health Alert   Conveys the highest level of importance; warrants immediate action or attention.
Health Advisory   Provides important information for a specific incident or situation; may not require immediate action.
Health Update   Provides updated information regarding an incident or situation; unlikely to require immediate action.

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Positive Rapid Influenza Test Results Summary Worksheet

Reporting week: ____/____/____-____/____/____ (Sunday – Saturday)

Reporting Facility/Practice: _____

County: _____

Total Positive Rapid Tests by Type				
	A	**B**	**A or B**	**Unknown**
Sunday				
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				
Total positive				

Notes:
- Only positive rapid tests should be reported using this worksheet. Positive viral cultures, "rapid" viral cultures, PCRs, DFAs, and IFAs should be reported electronically or using the DHEC 1129 Cards.

- Influenza is reportable year-round. Positive rapid tests should be reported within one week. Fax this worksheet by NOON ON MONDAY OF THE FOLLOWING WEEK to the regional health department. Contact numbers for regional health departments are available at: http://www.scdhec.gov/health/disease/reportables.htm.

- Contact the regional health department if you wish to submit this worksheet via email.

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Laboratory Confirmed Influenza Hospitalizations
Reporting Worksheet (For Hospital Use)

Reporting hospital: _____

County: _____

Date of report: ____/____/____

Reporting week: ____/____/____ - ____/____/____ (Sunday-Saturday)

Contact name: _____

Contact telephone: _____

Age group	Total Weekly Hospitalizations
0-4	
5-17	
18-49	
50-64	
65+	
Unknown	
Total	

Notes:

- Laboratory confirmation includes RT-PCR, viral culture, DFA, IFA, and rapid tests.

- Fax this report to the **Regional Health Department** by **noon** Monday for the preceding week. Regional health department contact numbers are available at: http://www.scdhec.gov/health/disease/reportables.htm

- Report zeros if there were no influenza hospitalizations.

- Contact the regional health department to report an influenza associated death.